



HIPAA Companion Guide Specifications

TXN 278 Health Care Services Review and Response
(Prior Approval)

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Table of Contents

1. INTRODUCTION	1
2. SCOPE	2
3. 278 SERVICE REQUEST TRANSACTION MAP	3
4. 278 SERVICE RESPONSE TRANSACTION MAP	24
5. DOCUMENT CHANGE HISTORY	45
APPENDIX A	1



1. INTRODUCTION

This companion guide is designed to be used in conjunction with the *HIPAA Implementation Guide*. The companion guide specifications define current functions and other information specific to North Carolina Medicaid (NCXIX). The Division of Medical Assistance's (DMA) solution for HIPAA recommends suggested methods for utilizing the transactions.

2. SCOPE

The *United States Congress* included provisions to address the need for standards for electronic transactions and other administrative simplification issues in the HIPAA, Public Law 104-191, which was enacted on August 21, 1996. Through subtitle F of title II of that law, *Congress* added to title XI of the *Social Security Act* a new part C, titled "Administrative Simplification." On August 17, 2000, final regulations were published in the *Federal Register* for "Standards for Electronic Transactions", which became effective on October 16, 2000. The final rule requires compliance be met within two years of the rule effective date, making compliance necessary by October 16, 2002 unless covered entities have filed for an extension to the deadline.

This guide includes the scope and transaction maps for the Medicaid 278 Health Care Services Review and Response (PA) transaction set.

The scope of the Companion Guide is to provide support for the Prior Approval process. The following Service Type Codes are service types for which North Carolina Medicaid requires prior approval:

- Dental Care
- Durable Medical Equipment Purchase
- Durable Medical Equipment Rental
- Medical Care
- Long Term Care
- Skilled Nursing Care
- Rehabilitation
- Psychiatric
- Surgical
- Well Baby Care
- Home Health Care
- Private Duty Nursing
- Family Planning
- Vision (Optometry)
- Medically Related Transportation
- Anesthesia
- Oral Surgery
- Psychiatric Inpatient.

Due to the absence of medical necessity information within this transaction set, NCXIX still requires the appropriate paper Prior Approval (PA) form be submitted in order to determine the medical necessity of the service requested.

3. 278 SERVICE REQUEST TRANSACTION MAP

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
	1	R	ST01	Transaction Set Identifier Code	Follow rules of the Implementation Guide
			ST02	Transaction Set Control Number	Follow rules of the Implementation Guide
	1	R	BHT01	Hierarchical Structure Code	Follow rules of the Implementation Guide
			BHT02	Transaction Set Purpose Code	Follow rules of the Implementation Guide
			BHT03	Submitter Transaction Identifier	Follow rules of the Implementation Guide
			BHT04	Transaction Set Creation Date	Follow rules of the Implementation Guide
			BHT05	Transaction Set Creation Time	Follow rules of the Implementation Guide
			BHT06	Transaction Type Code	Follow rules of the Implementation Guide
2000A/R-53	1			UTILIZATION MANAGEMENT ORGANIZATION (UMO) LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
2010A/R-55	1	R		UTILIZATION MANAGEMENT ORGANIZATION (UMO) NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	UMO Last or Organization Name	Follow rules of the Implementation Guide
			NM104	UMO First Name	Follow rules of the Implementation Guide
			NM105	UMO Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	UMO Name Suffix	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	UMO Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
2000B/R-58	1			REQUESTOR LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
2010B/R-60	1			REQUESTOR NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	Requestor Last or Organization Name	Follow rules of the Implementation Guide
			NM104	Requestor First Name	Follow rules of the Implementation Guide
			NM105	Requestor Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Requestor Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Requestor Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	8	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Requestor Supplemental Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
	1	S	N301	Requestor Address Line	Follow rules of the Implementation Guide
			N302	Requestor Address Line	Follow rules of the Implementation Guide
	1	S	N401	Requestor City Name	Follow rules of the Implementation Guide
			N402	Requestor State or Province Code	Follow rules of the Implementation Guide
			N403	Requestor Postal Zone or ZIP Code	Follow rules of the Implementation Guide
			N404	Requestor Country Code	Follow rules of the Implementation Guide
			N405	Location Qualifier	Follow rules of the Implementation Guide
			N406	Location Identifier	Follow rules of the Implementation Guide
	1	S	PER01	Contact Function Code	Follow rules of the Implementation Guide
			PER02	Requestor Contact Name	Follow rules of the Implementation Guide
			PER03	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER04	Requestor Contact Communication Number	Follow rules of the Implementation Guide
			PER05	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER06	Requestor Contact Communication Number	Follow rules of the Implementation Guide
			PER07	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER08	Requestor Contact Communication Number	Follow rules of the Implementation Guide
			PER09	Contact Inquiry Reference	Follow rules of the Implementation Guide
	1	S	PRV01	Provider Code	Follow rules of the Implementation Guide
			PRV02	Reference Identification Qualifier	Follow rules of the Implementation Guide
			PRV03	Provider Taxonomy Code	Follow rules of the Implementation Guide
			PRV04	State or Province Code	Follow rules of the Implementation Guide
			PRV05	Provider Specialty Information	Follow rules of the Implementation Guide
			PRV06	Provider Organization Code	Follow rules of the Implementation Guide
2000C/R-73	1	R		DETAIL, SUBSCRIBER LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	1	S	DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Accident Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Last Menstrual Period Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Estimated Birth Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Onset Date	Follow rules of the Implementation Guide
	1	S	HI01-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI01-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI01-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI01-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI01-5	Monetary Amount	Follow rules of the Implementation Guide
			HI01-6	Quantity	Follow rules of the Implementation Guide
			HI01-7	Version Identifier	Follow rules of the Implementation Guide
			HI02	Health Care Code Information	Follow rules of the Implementation Guide
			HI02-1	Diagnosis Type Code	Follow rules of the Implementation Guide



LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI02-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI02-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI02-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI02-5	Monetary Amount	Follow rules of the Implementation Guide
			HI02-6	Quantity	Follow rules of the Implementation Guide
			HI02-7	Version Identifier	Follow rules of the Implementation Guide
			HI03	Health Care Code Information	Follow rules of the Implementation Guide
			HI03-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI03-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI03-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI03-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI03-5	Monetary Amount	Follow rules of the Implementation Guide
			HI03-6	Quantity	Follow rules of the Implementation Guide
			HI03-7	Version Identifier	Follow rules of the Implementation Guide
			HI04	Health Care Code Information	Follow rules of the Implementation Guide
			HI04-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI04-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI04-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI04-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI04-5	Monetary Amount	Follow rules of the Implementation Guide
			HI04-6	Quantity	Follow rules of the Implementation Guide



LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI04-7	Version Identifier	Follow rules of the Implementation Guide
			HI05	Health Care Code Information	Follow rules of the Implementation Guide
			HI05-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI05-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI05-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI05-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI05-5	Monetary Amount	Follow rules of the Implementation Guide
			HI05-6	Quantity	Follow rules of the Implementation Guide
			HI05-7	Version Identifier	Follow rules of the Implementation Guide
			HI06	Health Care Code Information	Follow rules of the Implementation Guide
			HI06-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI06-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI06-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI06-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI06-5	Monetary Amount	Follow rules of the Implementation Guide
			HI06-6	Quantity	Follow rules of the Implementation Guide
			HI06-7	Version Identifier	Follow rules of the Implementation Guide
			HI07	Health Care Code Information	Follow rules of the Implementation Guide
			HI07-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI07-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI07-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI07-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI07-5	Monetary Amount	Follow rules of the Implementation Guide
			HI07-6	Quantity	Follow rules of the Implementation Guide
			HI07-7	Version Identifier	Follow rules of the Implementation Guide
			HI08	Health Care Code Information	Follow rules of the Implementation Guide
			HI08-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI08-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI08-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI08-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI08-5	Monetary Amount	Follow rules of the Implementation Guide
			HI08-6	Quantity	Follow rules of the Implementation Guide
			HI08-7	Version Identifier	Follow rules of the Implementation Guide
			HI09	Health Care Code Information	Follow rules of the Implementation Guide
			HI09-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI09-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI09-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI09-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI09-5	Monetary Amount	Follow rules of the Implementation Guide
			HI09-6	Quantity	Follow rules of the Implementation Guide
			HI09-7	Version Identifier	Follow rules of the Implementation Guide
			HI10	Health Care Code Information	Follow rules of the Implementation Guide
			HI10-1	Diagnosis Type Code	Follow rules of the Implementation Guide



LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI10-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI10-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI10-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI10-5	Monetary Amount	Follow rules of the Implementation Guide
			HI10-6	Quantity	Follow rules of the Implementation Guide
			HI10-7	Version Identifier	Follow rules of the Implementation Guide
			HI11	Health Care Code Information	Follow rules of the Implementation Guide
			HI11-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI11-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI11-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI11-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI11-5	Monetary Amount	Follow rules of the Implementation Guide
			HI11-6	Quantity	Follow rules of the Implementation Guide
			HI11-7	Version Identifier	Follow rules of the Implementation Guide
			HI12	Health Care Code Information	Follow rules of the Implementation Guide
			HI12-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI12-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI12-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI12-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI12-5	Monetary Amount	Follow rules of the Implementation Guide
			HI12-6	Quantity	Follow rules of the Implementation Guide



LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI12-7	Version Identifier	Follow rules of the Implementation Guide
2010C/R-89	1	R		SUBSCRIBER NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	Subscriber Last Name	Follow rules of the Implementation Guide
			NM104	Subscriber First Name	Follow rules of the Implementation Guide
			NM105	Subscriber Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Subscriber Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Subscriber Primary Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	1	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Subscriber Supplemental Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	1	S	DMG01	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DMG02	Subscriber Birth Date	Follow rules of the Implementation Guide
			DMG03	Subscriber Gender Code	Follow rules of the Implementation Guide
			DMG04	Marital Status Code	Follow rules of the Implementation Guide
			DMG05	Race or Ethnicity Code	Follow rules of the Implementation Guide
			DMG06	Citizenship Status Code	Follow rules of the Implementation Guide
			DMG07	Country Code	Follow rules of the Implementation Guide
			DMG08	Basis of Verification Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			DMG09	Quantity	Follow rules of the Implementation Guide
2000D/S-96	1	S		DETAIL, DEPENDENT LEVEL	NC Medicaid will not use this loop
2000E/R-121	> 1	R		SERVICE PROVIDER LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	1	S	MSG01	Free-Form Message Text	Follow rules of the Implementation Guide
			MSG02	Printer Control Code	Follow rules of the Implementation Guide
			MSG03	Number	Follow rules of the Implementation Guide
2010E/R-124	3	R		SERVICE PROVIDER NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	Service Provider Last or Organization Name	Follow rules of the Implementation Guide
			NM104	Service Provider First Name	Follow rules of the Implementation Guide
			NM105	Service Provider Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Service Provider Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Service Provider Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	7	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Service Provider Supplemental Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	1	S	N301	Service Provider Address Line	Follow rules of the Implementation Guide
			N302	Service Provider Address Line	Follow rules of the Implementation Guide
	1	S	N401	Service Provider City Name	Follow rules of the Implementation Guide
			N402	Service Provider State or Province Code	Follow rules of the Implementation Guide
			N403	Service Provider Postal Zone or ZIP Code	Follow rules of the Implementation Guide
			N404	Service Provider Country Code	Follow rules of the Implementation Guide
			N405	Location Qualifier	Follow rules of the Implementation Guide
			N406	Location Identifier	Follow rules of the Implementation Guide
	1	S	PER01	Contact Function Code	Follow rules of the Implementation Guide
			PER02	Service Provider Contact Name	Follow rules of the Implementation Guide
			PER03	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER04	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER05	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER06	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER07	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER08	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER09	Contact Inquiry Reference	Follow rules of the Implementation Guide
	1	S	PRV01	Provider Code	Follow rules of the Implementation Guide
			PRV02	Reference Identification Qualifier	Follow rules of the Implementation Guide
			PRV03	Provider Taxonomy Code	Follow rules of the Implementation Guide
			PRV04	State or Province Code	Follow rules of the Implementation Guide
			PRV05	Provider Specialty Information	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			PRV06	Provider Organization Code	Follow rules of the Implementation Guide
2000F/R-137	>1	R		SERVICE LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	2	S	TRN01	Trace Type Code	Follow rules of the Implementation Guide
			TRN02	Service Trace Number	Follow rules of the Implementation Guide
			TRN03	Trace Assigning Entity Identifier	Follow rules of the Implementation Guide
			TRN04	Trace Assigning Entity Additional Identifier	Follow rules of the Implementation Guide
	1	R	UM01	Request Category Code	Follow rules of the Implementation Guide
			UM02	Certification Type Code	Follow rules of the Implementation Guide
			UM03	Service Type Code	NC Medicaid requires PA on the following Service Type Codes: See Appendix A
			UM04-1	Facility Type Code	Follow rules of the Implementation Guide
			UM04-2	Facility Code Qualifier	Follow rules of the Implementation Guide
			UM04-3	Claim Frequency Type Code	Follow rules of the Implementation Guide
			UM05-1	Related Causes Code	Follow rules of the Implementation Guide
			UM05-2	Related Causes Code	Follow rules of the Implementation Guide
			UM05-3	Related Causes Code	Follow rules of the Implementation Guide
			UM05-4	State Code	Follow rules of the Implementation Guide
			UM05-5	Country Code	Follow rules of the Implementation Guide
			UM06	Level of Service Code	Follow rules of the Implementation Guide
			UM07	Current Health Condition Code	Follow rules of the Implementation Guide
			UM08	Prognosis Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			UM09	Release Of Information Code	Follow rules of the Implementation Guide
			UM10	Delay Reason Code	Follow rules of the Implementation Guide
	1	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Previous Certification Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	1	S	DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Service Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Admission Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Discharge Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Surgery Date	Follow rules of the Implementation Guide
	1	S	HI01	Health Care Code Information	Follow rules of the Implementation Guide
			HI01-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI01-2	Procedure Code	Follow rules of the Implementation Guide
			HI01-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI01-4	Procedure Date	Follow rules of the Implementation Guide
			HI01-5	Monetary Amount	Follow rules of the Implementation Guide
			HI01-6	Procedure Quantity	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI01-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI02	Health Care Code Information	Follow rules of the Implementation Guide
			HI02-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI02-2	Procedure Code	Follow rules of the Implementation Guide
			HI02-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI02-4	Procedure Date	Follow rules of the Implementation Guide
			HI02-5	Monetary Amount	Follow rules of the Implementation Guide
			HI02-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI02-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI03	Health Care Code Information	Follow rules of the Implementation Guide
			HI03-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI03-2	Procedure Code	Follow rules of the Implementation Guide
			HI03-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI03-4	Procedure Date	Follow rules of the Implementation Guide
			HI03-5	Monetary Amount	Follow rules of the Implementation Guide
			HI03-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI03-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI04	Health Care Code Information	Follow rules of the Implementation Guide
			HI04-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI04-2	Procedure Code	Follow rules of the Implementation Guide
			HI04-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI04-4	Procedure Date	Follow rules of the Implementation Guide
			HI04-5	Monetary Amount	Follow rules of the Implementation Guide
			HI04-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI04-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI05	Health Care Code Information	Follow rules of the Implementation Guide
			HI05-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI05-2	Procedure Code	Follow rules of the Implementation Guide
			HI05-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI05-4	Procedure Date	Follow rules of the Implementation Guide
			HI05-5	Monetary Amount	Follow rules of the Implementation Guide
			HI05-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI05-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI06	Health Care Code Information	Follow rules of the Implementation Guide
			HI06-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI06-2	Procedure Code	Follow rules of the Implementation Guide
			HI06-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI06-4	Procedure Date	Follow rules of the Implementation Guide
			HI06-5	Monetary Amount	Follow rules of the Implementation Guide
			HI06-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI06-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI07	Health Care Code Information	Follow rules of the Implementation Guide
			HI07-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI07-2	Procedure Code	Follow rules of the Implementation Guide
			HI07-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI07-4	Procedure Date	Follow rules of the Implementation Guide
			HI07-5	Monetary Amount	Follow rules of the Implementation Guide
			HI07-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI07-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI08	Health Care Code Information	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI08-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI08-2	Procedure Code	Follow rules of the Implementation Guide
			HI08-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI08-4	Procedure Date	Follow rules of the Implementation Guide
			HI08-5	Monetary Amount	Follow rules of the Implementation Guide
			HI08-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI08-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI09	Health Care Code Information	Follow rules of the Implementation Guide
			HI09-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI09-2	Procedure Code	Follow rules of the Implementation Guide
			HI09-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI09-4	Procedure Date	Follow rules of the Implementation Guide
			HI09-5	Monetary Amount	Follow rules of the Implementation Guide
			HI09-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI09-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI10	Health Care Code Information	Follow rules of the Implementation Guide
			HI10-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI10-2	Procedure Code	Follow rules of the Implementation Guide
			HI10-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI10-4	Procedure Date	Follow rules of the Implementation Guide
			HI10-5	Monetary Amount	Follow rules of the Implementation Guide
			HI10-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI10-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI11	Health Care Code Information	Follow rules of the Implementation Guide
			HI11-1	Code List Qualifier Code	Follow rules of the Implementation Guide



LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI11-2	Procedure Code	Follow rules of the Implementation Guide
			HI11-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI11-4	Procedure Date	Follow rules of the Implementation Guide
			HI11-5	Monetary Amount	Follow rules of the Implementation Guide
			HI11-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI11-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI12	Health Care Code Information	Follow rules of the Implementation Guide
			HI12-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI12-2	Procedure Code	Follow rules of the Implementation Guide
			HI12-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI12-4	Procedure Date	Follow rules of the Implementation Guide
			HI12-5	Monetary Amount	Follow rules of the Implementation Guide
			HI12-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI12-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
	1	S	HSD01	Quantity Qualifier	Follow rules of the Implementation Guide
			HSD02	Service Unit Count	Follow rules of the Implementation Guide
			HSD03	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			HSD04	Sample Selection Modulus	Follow rules of the Implementation Guide
			HSD05	Time Period Qualifier	Follow rules of the Implementation Guide
			HSD06	Period Count	Follow rules of the Implementation Guide
			HSD07	Ship, Delivery or Calendar Pattern Code	Follow rules of the Implementation Guide
			HSD08	Delivery Pattern Time Code	Follow rules of the Implementation Guide
	6	S	CRC01	Condition Code Category	Follow rules of the Implementation Guide
			CRC02	Certification Condition Indicator	Follow rules of the Implementation Guide
			CRC03	Condition Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			CRC04	Condition Code	Follow rules of the Implementation Guide
			CRC05	Condition Code	Follow rules of the Implementation Guide
			CRC06	Condition Code	Follow rules of the Implementation Guide
			CRC07	Condition Code	Follow rules of the Implementation Guide
	1	S	CL101	Admission Type Code	Follow rules of the Implementation Guide
			CL102	Admission Source Code	Follow rules of the Implementation Guide
			CL103	Patient Status Code	Follow rules of the Implementation Guide
			CL104	Nursing Home Residential Status Code	Follow rules of the Implementation Guide
	1	S	CR101	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			CR102	Patient Weight	Follow rules of the Implementation Guide
			CR103	Ambulance Transport Code	Follow rules of the Implementation Guide
			CR104	Ambulance Transport Reason Code	Follow rules of the Implementation Guide
			CR105	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			CR106	Transport Distance	Follow rules of the Implementation Guide
			CR107	Ambulance Trip Origin Address	Follow rules of the Implementation Guide
			CR108	Ambulance Trip Destination Address	Follow rules of the Implementation Guide
			CR109	Round Trip Purpose Description	Follow rules of the Implementation Guide
			CR110	Stretcher Purpose Description	Follow rules of the Implementation Guide
	1	S	CR201	Treatment Series Number	Follow rules of the Implementation Guide
			CR202	Treatment Count	Follow rules of the Implementation Guide
			CR203	Subluxation Level Code	Follow rules of the Implementation Guide
			CR204	Subluxation Level Code	Follow rules of the Implementation Guide
			CR205	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			CR206	Treatment Period Count	Follow rules of the Implementation Guide
			CR207	Monthly Treatment Count	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			CR208	Patient Condition Code	Follow rules of the Implementation Guide
			CR209	Complication Indicator	Follow rules of the Implementation Guide
			CR210	Patient Condition Description	Follow rules of the Implementation Guide
			CR211	Patient Condition Description	Follow rules of the Implementation Guide
			CR212	X-ray Availability Indicator	Follow rules of the Implementation Guide
	1	S	CR501	Certification Type Code	Follow rules of the Implementation Guide
			CR502	Quantity	Follow rules of the Implementation Guide
			CR503	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
			CR504	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
			CR505	Equipment Reason Description	Follow rules of the Implementation Guide
			CR506	Oxygen Flow Rate	Follow rules of the Implementation Guide
			CR507	Daily Oxygen Use Count	Follow rules of the Implementation Guide
			CR508	Oxygen Use Period Hour Count	Follow rules of the Implementation Guide
			CR509	Respiratory Therapist Order Text	Follow rules of the Implementation Guide
			CR510	Arterial Blood Gas Quantity	Follow rules of the Implementation Guide
			CR511	Oxygen Saturation Quantity	Follow rules of the Implementation Guide
			CR512	Oxygen Test Condition Code	Follow rules of the Implementation Guide
			CR513	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR514	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR515	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR516	Portable Oxygen System Flow Rate	Follow rules of the Implementation Guide
			CR517	Oxygen Delivery System Code	Follow rules of the Implementation Guide
			CR518	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
	1	S	CR601	Prognosis Code	Follow rules of the Implementation Guide
			CR602	Service From Date	Follow rules of the Implementation Guide

LOOP	SEG Repeat	SEG Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			CR603	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			CR604	Home Health Certification Period	Follow rules of the Implementation Guide
			CR605	Date	Follow rules of the Implementation Guide
			CR606	Skilled Nursing Facility Indicator	Follow rules of the Implementation Guide
			CR607	Medicare Coverage Indicator	Follow rules of the Implementation Guide
			CR608	Certification Type Code	Follow rules of the Implementation Guide
			CR609	Surgery Date	Follow rules of the Implementation Guide
			CR610	Product or Service ID Qualifier	Follow rules of the Implementation Guide
			CR611	Surgical Procedure Code	Follow rules of the Implementation Guide
			CR612	Physician Order Date	Follow rules of the Implementation Guide
			CR613	Last Visit Date	Follow rules of the Implementation Guide
			CR614	Physician Contact Date	Follow rules of the Implementation Guide
			CR615	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			CR616	Last Admission Period	Follow rules of the Implementation Guide
			CR617	Patient Discharge Facility Type Code	Follow rules of the Implementation Guide
			CR618	Date	Follow rules of the Implementation Guide
			CR619	Date	Follow rules of the Implementation Guide
			CR620	Date	Follow rules of the Implementation Guide
			CR621	Date	Follow rules of the Implementation Guide
	1	S	MSG01	Free Form Message Text	Follow rules of the Implementation Guide
			MSG02	Printer Control Code	Follow rules of the Implementation Guide
			MSG03	Number	Follow rules of the Implementation Guide
9999	1			TRANSACTION SET TRAILER	Follow rules of the Implementation Guide
	1	R	SE01	Transaction Segment Count	Follow rules of the Implementation Guide
			SE02	Transaction Set Control Number	Follow rules of the Implementation Guide



4. 278 SERVICE RESPONSE TRANSACTION MAP

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
	1	R	ST01	Transaction Set Identifier Code	Follow rules of the Implementation Guide
			ST02	Transaction Set Control Number	Follow rules of the Implementation Guide
	1	R	BHT01	Hierarchical Structure Code	Follow rules of the Implementation Guide
			BHT02	Transaction Set Purpose Code	Follow rules of the Implementation Guide
			BHT03	Submitter Transaction Identifier	Follow rules of the Implementation Guide
			BHT04	Transaction Set Creation Date	Follow rules of the Implementation Guide
			BHT05	Transaction Set Creation Time	Follow rules of the Implementation Guide
			BHT06	Transaction Type Code	Follow rules of the Implementation Guide
2000A/R-221	1	R		UMO	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
2010A/R-225	1	R		UMO	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	UMO Last or Organization Name	Follow rules of the Implementation Guide
			NM104	UMO First Name	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			NM105	UMO Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	UMO Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	UMO Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	1	S	PER01	Contact Function Code	Follow rules of the Implementation Guide
			PER02	UMO Contact Name	Follow rules of the Implementation Guide
			PER03	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER04	UMO Contact Communication Number	Follow rules of the Implementation Guide
			PER05	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER06	UMO Contact Communication Number	Follow rules of the Implementation Guide
			PER07	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER08	UMO Contact Communication Number	Follow rules of the Implementation Guide
			PER09	Contact Inquiry Reference	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
2000B/R-234	1	R		REQUESTOR LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
2010B/R-236	1			REQUESTOR NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	Requestor Last or Organization Name	Follow rules of the Implementation Guide
			NM104	Requestor First Name	Follow rules of the Implementation Guide
			NM105	Requestor Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Requestor Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Requestor Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	8	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Requestor Supplemental Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
	1	S	PRV01	Provider Code	Follow rules of the Implementation Guide
			PRV02	Reference Identification Qualifier	Follow rules of the Implementation Guide
			PRV03	Provider Taxonomy Code	Follow rules of the Implementation Guide
			PRV04	State or Province Code	Follow rules of the Implementation Guide
			PRV05	Provider Specialty Information	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			PRV06	Provider Organization Code	Follow rules of the Implementation Guide
2000C/R-245	1	R		DETAIL, SUBSCRIBER LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
	1	S	DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Accident Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Last Menstrual Period Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Estimated Birth Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Onset Date	Follow rules of the Implementation Guide
	1	S	HI01-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI01-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI01-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI01-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI01-5	Monetary Amount	Follow rules of the Implementation Guide
			HI01-6	Quantity	Follow rules of the Implementation Guide
			HI01-7	Version Identifier	Follow rules of the Implementation Guide
			HI02-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI02-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI02-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI02-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI02-5	Monetary Amount	Follow rules of the Implementation Guide
			HI02-6	Quantity	Follow rules of the Implementation Guide
			HI02-7	Version Identifier	Follow rules of the Implementation Guide
			HI03-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI03-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI03-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI03-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI03-5	Monetary Amount	Follow rules of the Implementation Guide
			HI03-6	Quantity	Follow rules of the Implementation Guide
			HI03-7	Version Identifier	Follow rules of the Implementation Guide
			HI04-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI04-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI04-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI04-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI04-5	Monetary Amount	Follow rules of the Implementation Guide
			HI04-6	Quantity	Follow rules of the Implementation Guide
			HI04-7	Version Identifier	Follow rules of the Implementation Guide
			HI05-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI05-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI05-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI05-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI05-5	Monetary Amount	Follow rules of the Implementation Guide
			HI05-6	Quantity	Follow rules of the Implementation Guide
			HI05-7	Version Identifier	Follow rules of the Implementation Guide
			HI06-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI06-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI06-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI06-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI06-5	Monetary Amount	Follow rules of the Implementation Guide
			HI06-6	Quantity	Follow rules of the Implementation Guide
			HI06-7	Version Identifier	Follow rules of the Implementation Guide
			HI07-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI07-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI07-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI07-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI07-5	Monetary Amount	Follow rules of the Implementation Guide
			HI07-6	Quantity	Follow rules of the Implementation Guide
			HI07-7	Version Identifier	Follow rules of the Implementation Guide
			HI08-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI08-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI08-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI08-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI08-5	Monetary Amount	Follow rules of the Implementation Guide
			HI08-6	Quantity	Follow rules of the Implementation Guide
			HI08-7	Version Identifier	Follow rules of the Implementation Guide
			HI09-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI09-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI09-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI09-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI09-5	Monetary Amount	Follow rules of the Implementation Guide
			HI09-6	Quantity	Follow rules of the Implementation Guide
			HI09-7	Version Identifier	Follow rules of the Implementation Guide
			HI10-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI10-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI10-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI10-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI10-5	Monetary Amount	Follow rules of the Implementation Guide
			HI10-6	Quantity	Follow rules of the Implementation Guide
			HI10-7	Version Identifier	Follow rules of the Implementation Guide
			HI11-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI11-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI11-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI11-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI11-5	Monetary Amount	Follow rules of the Implementation Guide
			HI11-6	Quantity	Follow rules of the Implementation Guide
			HI11-7	Version Identifier	Follow rules of the Implementation Guide
			HI12-1	Diagnosis Type Code	Follow rules of the Implementation Guide
			HI12-2	Diagnosis Code	Do not transmit the decimal points in the diagnosis codes. The decimal point is assumed.
			HI12-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI12-4	Diagnosis Date	Follow rules of the Implementation Guide
			HI12-5	Monetary Amount	Follow rules of the Implementation Guide
			HI12-6	Quantity	Follow rules of the Implementation Guide
			HI12-7	Version Identifier	Follow rules of the Implementation Guide
2010C/R-262	1	R		SUBSCRIBER NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			NM103	Subscriber Last Name	Follow rules of the Implementation Guide
			NM104	Subscriber First Name	Follow rules of the Implementation Guide
			NM105	Subscriber Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Subscriber Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Subscriber Primary Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	1	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Subscriber Supplemental Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
	1	S	DMG01	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DMG02	Subscriber Birth Date	Follow rules of the Implementation Guide
			DMG03	Subscriber Gender Code	Follow rules of the Implementation Guide
			DMG04	Marital Status Code	Follow rules of the Implementation Guide
			DMG05	Race or Ethnicity Code	Follow rules of the Implementation Guide
			DMG06	Citizenship Status Code	Follow rules of the Implementation Guide
			DMG07	Country Code	Follow rules of the Implementation Guide
			DMG08	Basis of Verification Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			DMG09	Quantity	Follow rules of the Implementation Guide
2000D/S-271	1	S		DEPENDENT LEVEL	Follow rules of the Implementation Guide
2010D/R-288	1	R		DEPENDENT NAME	NC Medicaid will not use this loop
2000E/R-300	> 1	R		SERVICE PROVIDER LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	1	S	MSG01	Free Form Message Text	Follow rules of the Implementation Guide
			MSG02	Printer Carriage Control Code	Follow rules of the Implementation Guide
			MSG03	Number	Follow rules of the Implementation Guide
2010E/R-303	3	R		SERVICE PROVIDER NAME	Follow rules of the Implementation Guide
	1	R	NM101	Entity Identifier Code	Follow rules of the Implementation Guide
			NM102	Entity Type Qualifier	Follow rules of the Implementation Guide
			NM103	Service Provider Last or Organization Name	Follow rules of the Implementation Guide
			NM104	Service Provider First Name	Follow rules of the Implementation Guide
			NM105	Service Provider Middle Name	Follow rules of the Implementation Guide
			NM106	Name Prefix	Follow rules of the Implementation Guide
			NM107	Service Provider Name Suffix	Follow rules of the Implementation Guide
			NM108	Identification Code Qualifier	Follow rules of the Implementation Guide
			NM109	Service Provider Identifier	Follow rules of the Implementation Guide
			NM110	Entity Relationship Code	Follow rules of the Implementation Guide
			NM111	Entity Identifier Code	Follow rules of the Implementation Guide
	7	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Service Provider Supplemental Identifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	1	S	N301	Service Provider Address Line	Follow rules of the Implementation Guide
			N302	Service Provider Address Line	Follow rules of the Implementation Guide
	1	S	N401	Service Provider City Name	Follow rules of the Implementation Guide
			N402	Service Provider State or Province Code	Follow rules of the Implementation Guide
			N403	Service Provider Postal Zone or ZIP Code	Follow rules of the Implementation Guide
			N404	Service Provider Country Code	Follow rules of the Implementation Guide
			N405	Location Qualifier	Follow rules of the Implementation Guide
			N406	Location Identifier	Follow rules of the Implementation Guide
	1	S	PER01	Contact Function Code	Follow rules of the Implementation Guide
			PER02	Service Provider Contact Name	Follow rules of the Implementation Guide
			PER03	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER04	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER05	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER06	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER07	Communication Number Qualifier	Follow rules of the Implementation Guide
			PER08	Service Provider Contact Communication Number	Follow rules of the Implementation Guide
			PER09	Contact Inquiry Reference	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
	1	S	PRV01	Provider Code	Follow rules of the Implementation Guide
			PRV02	Reference Identification Qualifier	Follow rules of the Implementation Guide
			PRV03	Provider Taxonomy Code	Follow rules of the Implementation Guide
			PRV04	State or Province Code	Follow rules of the Implementation Guide
			PRV05	Provider Specialty Information	Follow rules of the Implementation Guide
			PRV06	Provider Organization Code	Follow rules of the Implementation Guide
2000F/R-318	> 1			SERVICE LEVEL	Follow rules of the Implementation Guide
	1	R	HL01	Hierarchical ID Number	Follow rules of the Implementation Guide
			HL02	Hierarchical Parent ID Number	Follow rules of the Implementation Guide
			HL03	Hierarchical Level Code	Follow rules of the Implementation Guide
			HL04	Hierarchical Child Code	Follow rules of the Implementation Guide
	3	S	TRN01	Trace Type Code	Follow rules of the Implementation Guide
			TRN02	Service Trace Number	Follow rules of the Implementation Guide
			TRN03	Trace Assigning Entity Identifier	Follow rules of the Implementation Guide
			TRN04	Trace Assigning Entity Additional Identifier	Follow rules of the Implementation Guide
	9	S	AAA01	Valid Request Indicator	Follow rules of the Implementation Guide
			AAA02	Agency Qualifier Code	Follow rules of the Implementation Guide
			AAA03	Reject Reason Code	Follow rules of the Implementation Guide
			AAA04	Follow-up Action Code	Follow rules of the Implementation Guide
	1	R	UM01	Request Category Code	Follow rules of the Implementation Guide
			UM02	Certification Type Code	Follow rules of the Implementation Guide
			UM03	Service Type Code	Follow rules of the Implementation Guide
			UM04-1	Facility Type Code	Follow rules of the Implementation Guide
			UM04-2	Facility Code Qualifier	Follow rules of the Implementation Guide
			UM04-3	Claim Frequency Type Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			UM05	Related Causes Information	Follow rules of the Implementation Guide
			UM06	Level of Service Code	Follow rules of the Implementation Guide
			UM07	Current Health Condition Code	Follow rules of the Implementation Guide
			UM08	Prognosis Code	Follow rules of the Implementation Guide
			UM09	Release Of Information Code	Follow rules of the Implementation Guide
			UM10	Delay Reason Code	Follow rules of the Implementation Guide
	1	S	HCR01	Certification Action Code	Follow rules of the Implementation Guide
			HCR02	Certification Number	Follow rules of the Implementation Guide
			HCR03	Reject Reason Code	Follow rules of the Implementation Guide
			HCR04	Second Surgical Opinion Indicator	Follow rules of the Implementation Guide
	1	S	REF01	Reference Identification Qualifier	Follow rules of the Implementation Guide
			REF02	Previous Certification Identifier	Follow rules of the Implementation Guide
			REF03	Description	Follow rules of the Implementation Guide
			REF04	Reference Identifier	Follow rules of the Implementation Guide
	1	S	DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Service Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Admission Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Proposed or Actual Discharge Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			DTP03	Proposed or Actual Surgery Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Certification Issue Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Certification Expiration Date	Follow rules of the Implementation Guide
			DTP01	Date Time Qualifier	Follow rules of the Implementation Guide
			DTP02	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			DTP03	Certification Effective Date	Follow rules of the Implementation Guide
	1	S	HI01-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI01-2	Procedure Code	Follow rules of the Implementation Guide
			HI01-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI01-4	Procedure Date	Follow rules of the Implementation Guide
			HI01-5	Monetary Amount	Follow rules of the Implementation Guide
			HI01-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI01-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI02-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI02-2	Procedure Code	Follow rules of the Implementation Guide
			HI02-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI02-4	Procedure Date	Follow rules of the Implementation Guide
			HI02-5	Monetary Amount	Follow rules of the Implementation Guide
			HI02-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI02-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI03-1	Code List Qualifier Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI03-2	Procedure Code	Follow rules of the Implementation Guide
			HI03-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI03-4	Procedure Date	Follow rules of the Implementation Guide
			HI03-5	Monetary Amount	Follow rules of the Implementation Guide
			HI03-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI03-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI04-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI04-2	Procedure Code	Follow rules of the Implementation Guide
			HI04-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI04-4	Procedure Date	Follow rules of the Implementation Guide
			HI04-5	Monetary Amount	Follow rules of the Implementation Guide
			HI04-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI04-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI05-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI05-2	Procedure Code	Follow rules of the Implementation Guide
			HI05-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI05-4	Procedure Date	Follow rules of the Implementation Guide
			HI05-5	Monetary Amount	Follow rules of the Implementation Guide
			HI05-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI05-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI06-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI06-2	Procedure Code	Follow rules of the Implementation Guide
			HI06-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI06-4	Procedure Date	Follow rules of the Implementation Guide
			HI06-5	Monetary Amount	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI06-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI06-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI07-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI07-2	Procedure Code	Follow rules of the Implementation Guide
			HI07-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI07-4	Procedure Date	Follow rules of the Implementation Guide
			HI07-5	Monetary Amount	Follow rules of the Implementation Guide
			HI07-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI07-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI08-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI08-2	Procedure Code	Follow rules of the Implementation Guide
			HI08-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI08-4	Procedure Date	Follow rules of the Implementation Guide
			HI08-5	Monetary Amount	Follow rules of the Implementation Guide
			HI08-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI08-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI09-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI09-2	Procedure Code	Follow rules of the Implementation Guide
			HI09-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI09-4	Procedure Date	Follow rules of the Implementation Guide
			HI09-5	Monetary Amount	Follow rules of the Implementation Guide
			HI09-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI09-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI10-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI10-2	Procedure Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HI10-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI10-4	Procedure Date	Follow rules of the Implementation Guide
			HI10-5	Monetary Amount	Follow rules of the Implementation Guide
			HI10-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI10-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI11-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI11-2	Procedure Code	Follow rules of the Implementation Guide
			HI11-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI11-4	Procedure Date	Follow rules of the Implementation Guide
			HI11-5	Monetary Amount	Follow rules of the Implementation Guide
			HI11-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI11-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
			HI12-1	Code List Qualifier Code	Follow rules of the Implementation Guide
			HI12-2	Procedure Code	Follow rules of the Implementation Guide
			HI12-3	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			HI12-4	Procedure Date	Follow rules of the Implementation Guide
			HI12-5	Monetary Amount	Follow rules of the Implementation Guide
			HI12-6	Procedure Quantity	Follow rules of the Implementation Guide
			HI12-7	Version, Release, or Industry Identifier	Follow rules of the Implementation Guide
	1	S	HSD01	Quantity Qualifier	Follow rules of the Implementation Guide
			HSD02	Service Unit Count	Follow rules of the Implementation Guide
			HSD03	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			HSD04	Sample Selection Modulus	Follow rules of the Implementation Guide
			HSD05	Time Period Qualifier	Follow rules of the Implementation Guide
			HSD06	Period Count	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			HSD07	Ship, Delivery or Calendar Pattern Date	Follow rules of the Implementation Guide
			HSD08	Delivery Pattern Time Code	Follow rules of the Implementation Guide
	1	S	CL101	Admission Type Code	Follow rules of the Implementation Guide
			CL102	Admission Source Code	Follow rules of the Implementation Guide
			CL103	Patient Status Code	Follow rules of the Implementation Guide
			CL104	Nursing Home Residential Status Code	Follow rules of the Implementation Guide
	1	S	CR101	Unit or Basis for Measurement Code	Follow rules of the Implementation Guide
			CR102	Weight	Follow rules of the Implementation Guide
			CR103	Ambulance Transport Code	Follow rules of the Implementation Guide
			CR104	Ambulance Transport Reason Code	Follow rules of the Implementation Guide
			CR105	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			CR106	Transport Distance	Follow rules of the Implementation Guide
			CR107	Ambulance Trip Origin Address	Follow rules of the Implementation Guide
			CR108	Ambulance Trip Destination Address	Follow rules of the Implementation Guide
			CR109	Description	Follow rules of the Implementation Guide
			CR110	Description	Follow rules of the Implementation Guide
	1	S	CR201	Treatment Series Number	Follow rules of the Implementation Guide
			CR202	Treatment Count	Follow rules of the Implementation Guide
			CR203	Subluxation Level Code	Follow rules of the Implementation Guide
			CR204	Subluxation Level Code	Follow rules of the Implementation Guide
			CR205	Unit or Basis of Measurement Code	Follow rules of the Implementation Guide
			CR206	Treatment Period Count	Follow rules of the Implementation Guide
			CR207	Monthly Treatment Count	Follow rules of the Implementation Guide
			CR208	Nature of Condition Code	Follow rules of the Implementation Guide
			CR209	Yes/No Condition or Response Code	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			CR210	Description	Follow rules of the Implementation Guide
			CR211	Description	Follow rules of the Implementation Guide
			CR212	Yes/No Condition or Response Code	Follow rules of the Implementation Guide
	1	S	CR501	Certification Type Code	Follow rules of the Implementation Guide
			CR502	Quantity	Follow rules of the Implementation Guide
			CR503	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
			CR504	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
			CR505	Equipment Reason Description	Follow rules of the Implementation Guide
			CR506	Oxygen Flow Rate	Follow rules of the Implementation Guide
			CR507	Daily Oxygen Use Count	Follow rules of the Implementation Guide
			CR508	Oxygen Use Period Hour Count	Follow rules of the Implementation Guide
			CR509	Respiratory Therapist Order Text	Follow rules of the Implementation Guide
			CR510	Quantity	Follow rules of the Implementation Guide
			CR511	Quantity	Follow rules of the Implementation Guide
			CR512	Oxygen Test Condition Code	Follow rules of the Implementation Guide
			CR513	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR514	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR515	Oxygen Test Findings Code	Follow rules of the Implementation Guide
			CR516	Portable Oxygen System Flow Rate	Follow rules of the Implementation Guide
			CR517	Oxygen Delivery System Code	Follow rules of the Implementation Guide
			CR518	Oxygen Equipment Type Code	Follow rules of the Implementation Guide
	1	S	CR601	Prognosis Code	Follow rules of the Implementation Guide
			CR602	Service From Date	Follow rules of the Implementation Guide
			CR603	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			CR604	Home Health Certification Period	Follow rules of the Implementation Guide

LOOP	SEG Repeat	Seg Requirement	ELEMENT	Industry Name	North Carolina Medicaid Specifications
			CR605	Date	Follow rules of the Implementation Guide
			CR606	Skilled Nursing Facility Indicator	Follow rules of the Implementation Guide
			CR607	Medicare Coverage Indicator	Follow rules of the Implementation Guide
			CR608	Certification Type Code	Follow rules of the Implementation Guide
			CR609	Surgery Date	Follow rules of the Implementation Guide
			CR610	Product/Service ID Qualifier	Follow rules of the Implementation Guide
			CR611	Medical Code Value	Follow rules of the Implementation Guide
			CR612	Date	Follow rules of the Implementation Guide
			CR613	Date	Follow rules of the Implementation Guide
			CR614	Date	Follow rules of the Implementation Guide
			CR615	Date Time Period Format Qualifier	Follow rules of the Implementation Guide
			CR616	Date Time Period	Follow rules of the Implementation Guide
			CR617	Patient Location Code	Follow rules of the Implementation Guide
			CR618	Date	Follow rules of the Implementation Guide
			CR619	Date	Follow rules of the Implementation Guide
			CR620	Date	Follow rules of the Implementation Guide
			CR621	Date	Follow rules of the Implementation Guide
	1	S	MSG01	Free Form Message Text	See Appendix A
			MSG02	Printer Control Code	Follow rules of the Implementation Guide
			MSG03	Number	NC Medicaid will provide a message specific to the type of PA requested. See Appendix A
9999/R-384	1	R		TRANSACTION SET TRAILER	Follow rules of the Implementation Guide
	1	R	SE01	Transaction Segment Count	Follow rules of the Implementation Guide
			SE02	Transaction Set Control Number	Follow rules of the Implementation Guide



5. DOCUMENT CHANGE HISTORY

Project Information
Project Name: Health Insurance Portability and Accountability Act Transaction Sets and Code Sets (HTSCS)
Status: Final (Version number and date are used for configuration control of this deliverable)

The controlled master of this document is available in the EDS North Carolina Title Nineteen (NCXIX) eRoom®. Hard copies of this document are for information only and are not subject to document control.

Version	Issue Date	Created By	Comments/Reason
1.0	09/05/02	Sandy Miles	Original document

APPENDIX A

Service Type Code	Message
1 Medical Care	Contact EDS PA @ 800-688-6696
2 Surgical	Submit medical necessity on the required PA form
3 Consultation	Contact EDS PA @ 800-688-6696
4 Diagnostic X-Ray	Contact EDS PA @ 800-688-6696
5 Diagnostic Lab	Contact EDS PA @ 800-688-6696
6 Radiation Therapy	Contact EDS PA @ 800-688-6696
7 Anesthesia	Contact EDS PA @ 800-688-6696
8 Surgical Assistance	Submit medical necessity on the required PA form
12 Durable Medical Equipment Purchase	Submit medical necessity on the required PA form
14 Renal Supplies in the Home	Contact EDS PA @ 800-688-6696
15 Alternate Method Dialysis	Contact EDS PA @ 800-688-6696
16 Chronic Renal Disease (CRD) Equipment	Contact EDS PA @ 800-688-6696
17 Pre-Admission Testing	Contact EDS PA @ 800-688-6696
18 Durable Medical Equipment Rental	Submit medical necessity on the required PA form
20 Second Surgical Opinion	Contact EDS PA @ 800-688-6696
21 Third Surgical Opinion	Contact EDS PA @ 800-688-6696
23 Diagnostic Dental	Submit medical necessity on the required PA form
24 Periodontics	Submit medical necessity on the required PA form
25 Restorative	Submit medical necessity on the required PA form
26 Endodontics	Submit medical necessity on the required PA form
27 Maxillofacial Prosthetics	Submit medical necessity on the required PA form
28 Adjunctive Dental Services	Submit medical necessity on the required PA form
33 Chiropractic	Contact EDS PA @ 800-688-6696
34 Chiropractic Office Visits	Contact EDS PA @ 800-688-6696



Service Type Code	Message
35 Dental Care	Submit medical necessity on the required PA form
36 Dental Crowns	Submit medical necessity on the required PA form
37 Dental Accident	Submit medical necessity on the required PA form
38 Orthodontics	Submit medical necessity on the required PA form
39 Prosthodontics	Submit medical necessity on the required PA form
40 Oral Surgery	Submit medical necessity on the required PA form
42 Home Health Care	Contact EDS PA @ 800-688-6696
44 Home Health Visits	Contact EDS PA @ 800-688-6696
45 Hospice	Contact EDS PA @ 800-688-6696
46 Respite Care	Contact EDS PA @ 800-688-6696
48 Hospital - Inpatient	Contact EDS PA @ 800-688-6696
50 Hospital - Outpatient	Contact EDS PA @ 800-688-6696
51 Hospital - Emergency Accident	Contact EDS PA @ 800-688-6696
52 Hospital - Emergency Medical	Contact EDS PA @ 800-688-6696
53 Hospital - Ambulatory Surgical	Contact EDS PA @ 800-688-6696
54 Long Term Care	Submit medical necessity on the required PA form
56 Medically Related Transportation	Contact EDS PA @ 800-688-6696
57 Air Transportation	Contact EDS PA @ 800-688-6696
58 Cabulance	Contact EDS PA @ 800-688-6696
59 Licensed Ambulance	Contact EDS PA @ 800-688-6696
61 In-vitro Fertilization	Contact EDS PA @ 800-688-6696
62 MRI/CAT Scan	Contact EDS PA @ 800-688-6696
63 Donor Procedures	Contact EDS PA @ 800-688-6696
64 Acupuncture	Contact EDS PA @ 800-688-6696
65 Newborn Care	Contact EDS PA @ 800-688-6696
67 Smoking Cessation	Contact EDS PA @ 800-688-6696



Service Type Code	Message
68 Well Baby Care	Contact EDS PA @ 800-688-6696
69 Maternity	Contact EDS PA @ 800-688-6696
70 Transplants	Contact EDS PA @ 800-688-6696
71 Audiology Exam	Contact EDS PA @ 800-688-6696
72 Inhalation Therapy	Contact EDS PA @ 800-688-6696
73 Diagnostic Medical	Contact EDS PA @ 800-688-6696
74 Private Duty Nursing	Contact the DMA at 919-857-4020 for assistance
75 Prosthetic Device	Submit medical necessity on the required PA form
76 Dialysis	Contact EDS PA @ 800-688-6696
77 Otological Exam	Contact EDS PA @ 800-688-6696
78 Chemotherapy	Contact EDS PA @ 800-688-6696
79 Allergy Testing	Contact EDS PA @ 800-688-6696
80 Immunizations	Contact EDS PA @ 800-688-6696
82 Family Planning	Contact EDS PA @ 800-688-6696
83 Infertility	Contact EDS PA @ 800-688-6696
84 Abortion	Contact EDS PA @ 800-688-6696
85 AIDS	Contact EDS PA @ 800-688-6696
86 Emergency Services	Contact EDS PA @ 800-688-6696
93 Podiatry	Contact EDS PA @ 800-688-6696
94 Podiatry - Office Visits	Contact EDS PA @ 800-688-6696
95 Podiatry - Nursing Home Visits	Contact EDS PA @ 800-688-6696
98 Professional (Physician) Visit - Office	Contact EDS PA @ 800-688-6696
99 Professional (Physician) Visit - Inpatient	Contact EDS PA @ 800-688-6696
A0 Professional (Physician) Visit - Outpatient	Contact EDS PA @ 800-688-6696
A1 Professional (Physician) Visit - Nursing Home	Contact EDS PA @ 800-688-6696
A2 Professional (Physician) Visit - Skilled Nursing Facility	Contact EDS PA @ 800-688-6696



Service Type Code	Message
A3 Professional (Physician) Visit - Home	Contact EDS PA @ 800-688-6696
A4 Psychiatric	Contact Value Options at 888-510-1150 for assistance
A6 Psychotherapy	Contact Value Options at 888-510-1150 for assistance
A7 Psychiatric - Inpatient	Contact Value Options at 888-510-1150 for assistance
A8 Psychiatric - Outpatient	Contact Value Options at 888-510-1150 for assistance
A9 Rehabilitation	Submit medical necessity on the required PA form
AB Rehabilitation - Inpatient	Submit medical necessity on the required PA form
AC Rehabilitation - Outpatient	Submit medical necessity on the required PA form
AD Occupational Therapy	Contact EDS PA @ 800-688-6696
AE Physical Medicine	Contact EDS PA @ 800-688-6696
AF Speech Therapy	Contact EDS PA @ 800-688-6696
AG Skilled Nursing Care	Contact EDS PA @ 800-688-6696
AI Substance Abuse	Contact EDS PA @ 800-688-6696
AJ Alcoholism	Contact EDS PA @ 800-688-6696
AK Drug Addiction	Contact EDS PA @ 800-688-6696
AL Vision (Optometry)	For refractions, contact the Automated Voice Response System (AVRS) at 800-723-4337. For visual aids, submit a medical necessity on the required PA form
AR Experimental Drug Therapy	Contact EDS PA @ 800-688-6696
BB Partial Hospitalization (Psychiatric)	Contact Value Options at 888-510-1150 for assistance
BC Day Care (Psychiatric)	Contact Value Options at 888-510-1150 for assistance
BD Cognitive Therapy	Contact EDS PA @ 800-688-6696
BE Massage Therapy	Contact EDS PA @ 800-688-6696
BF Pulmonary Rehabilitation	Contact EDS PA @ 800-688-6696
BG Cardiac Rehabilitation	Contact EDS PA @ 800-688-6696
BS Invasive Procedures	Contact EDS PA @ 800-688-6696